

Fill in this information to identify the case:		GLORIA BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK
United States Bankruptcy Court for the:		
<u>EASTERN</u>	District of <u>NEW YORK</u> (State)	2023 OCT 10 P 2:11
Case number (if known): _____		Chapter _____
RECEIVED		
		<input type="checkbox"/> Check if this is an amended filing

Official Form 201**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>NORTH SOUTH US INC</u>		
2. All other names debtor used in the last 8 years			
Include any assumed names, trade names, and <i>doing business as</i> names			
3. Debtor's federal Employer Identification Number (EIN)	<u>8 4 - 3 0 1 0 1 1 3</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>8515 169TH ST</u>	Number	Street
	<u> </u>		
	<u>JAMAICA</u>	<u>NY</u>	<u>11432</u>
	City	State	ZIP Code
	<u>QUEENS</u>	Location of principal assets, if different from principal place of business	
	County	Number	Street
	<u> </u>		
5. Debtor's website (URL)	<u> </u>		

Debtor	NORTH SOUTH US INC		Case number (<i>if known</i>) _____
	Name _____		
<hr/>			
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		
<hr/>			
7. Describe debtor's business	<p>A. Check one:</p> <input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the above		
<hr/>			
	<p>B. Check all that apply:</p> <input type="checkbox"/> Tax-exempt entity (as described in 26 U.S.C. § 501) <input type="checkbox"/> Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3) <input type="checkbox"/> Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))		
<hr/>			
<p>C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes.</p> <p style="text-align: center;">4244</p>			
<hr/>			
8. Under which chapter of the Bankruptcy Code is the debtor filing?	<p>Check one:</p> <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11. Check all that apply: <ul style="list-style-type: none"> <input type="checkbox"/> The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input type="checkbox"/> The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). <input type="checkbox"/> The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the <i>Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11</i> (Official Form 201A) with this form. <input type="checkbox"/> The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2. <p><input type="checkbox"/> Chapter 12</p>		

Debtor	NORTH SOUTH US INC		Case number (<i>if known</i>) _____
Name _____			
9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY			
If more than 2 cases, attach a separate list.			
District _____ When _____ Case number _____ MM / DD / YYYY			
10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ When _____ MM / DD / YYYY			
List all cases. If more than 1, attach a separate list. Case number, if known _____			
11. Why is the case filed in <i>this district</i>? Check all that apply:			
<input checked="" type="checkbox"/> Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.			
12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.			
Why does the property need immediate attention? (Check all that apply.)			
<input type="checkbox"/> It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety. What is the hazard? _____			
<input type="checkbox"/> It needs to be physically secured or protected from the weather.			
<input type="checkbox"/> It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).			
<input type="checkbox"/> Other _____			
Where is the property? _____ Number _____ Street _____ _____			
City _____ State ZIP Code _____			
Is the property insured?			
<input type="checkbox"/> No <input type="checkbox"/> Yes. Insurance agency _____			
Contact name _____			
Phone _____			

Statistical and administrative information

Debtor

NORTH SOUTH US INC

Name

Case number (if known) _____

13. Debtor's estimation of available funds

Check one:

Funds will be available for distribution to unsecured creditors.
 After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

15. Estimated assets

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input checked="" type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING – Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

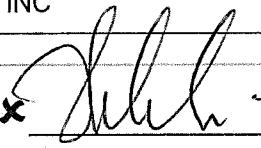
Executed on 10/10/2023
 MM / DD / YYYY

Signature of authorized representative of debtor

ISLAM MOHAMMED NUR

Printed name

Title PRESIDENT

<input type="checkbox"/> Debtor	NORTH SOUTH US INC <small>Name</small>	<small>Case number (if known)</small>
18. Signature of attorney		
		<small>Signature of attorney for debtor</small>
		<small>Date</small> <u>10/10/2023</u> <small>MM / DD / YYYY</small>
VALENTINE A. OKWARA ESQ		
<small>Printed name</small>		
OKWARA LAW PC		
<small>Firm name</small>		
90-24 SUTPHIN BLVD FL 2		
<small>Number</small>	<small>Street</small>	<small>State</small> <u>NY</u> <small>ZIP Code</small> <u>11435</u>
	<u>JAMAICA</u>	
<small>City</small>		
<u>(718) 558-5656</u>		<small>Email address</small>
<small>Contact phone</small>		<u>valanddino@aol.com</u>
<small>Bar number</small>		<small>State</small> <u>NY</u>
<u>5165055</u>		

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

In Re:

NORTH SOUTH US INC

Case No.

Chapter 7

Debtor(s)

VERIFICATION OF CREDITOR MATRIX/LIST OF CREDITORS

The undersigned debtor(s) or attorney for the debtor(s) hereby verifies that the creditor matrix/list of creditors submitted herein is true and correct to the best of his or her knowledge.

Dated: 10/10/2023

NORTH SOUTH US INC

Debtor

Joint Debtor

s/ VALENTINE A. OKWARA
Attorney for Debtor

Aries Global Logistics Llc
365 Franklin Avenue
Franklin Square, NY 11010

Camlet Fashions Ltd
24/ka Shohid Minar Road
5th Floor
Kalayanpur Dhaka Bangladesh

International Bond & Marine Brokerage Ltd
2 Hudson Pl
Hoboken NJ 07030

Winwear Limited
Gazipur 1704
Bangladesh

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

EASTERN District Of NEW YORK

In re

Case No. _____

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 3000

Prior to the filing of this statement I have received \$ 2000

Balance Due \$ 1000

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

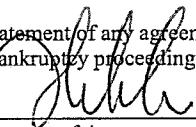
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/10/2023
Date


Signature of Attorney

OKWARA LAW P.C.
Name of law firm

Fill in this information to identify the case:

Debtor name	<u>NORTH SOUTH US INC</u>	
United States Bankruptcy Court for the:	<u>EASTERN</u>	District of <u>NEW YORK</u> (State)
Case number (If known):		

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from Schedule A/B.....

\$ 0

1b. **Total personal property:**

Copy line 91A from Schedule A/B.....

\$ 0

1c. **Total of all property:**

Copy line 92 from Schedule A/B.....

\$ 0

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D.....

\$ 0

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$ 845,295.8

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$ 138,000

4. **Total liabilities.....**

Lines 2 + 3a + 3b

\$ 983,295.8

Fill in this information to identify the case:

Debtor name	NORTH SOUTH US INC	
United States Bankruptcy Court for the:	NEW YORK	District of EASTERN (State)
Case number (If known):		

Check if this is an amended filing

Official Form 206A/B**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**

\$ 5000

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1. TD BANK	CHECKING	5 2 1 1
3.2. PNC BANK	CHECKING	5 9 4 8

\$ 0
\$ 2719

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

\$ _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

No. Go to Part 3.
 Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. _____	\$ _____
7.2. _____	\$ _____

\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known)

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1.

\$

8.2.

\$

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 0

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: _____ - _____ = → \$ _____

face amount

doubtful or uncollectible accounts

\$ _____

11b. Over 90 days old: _____ - _____ = → \$ _____

face amount

doubtful or uncollectible accounts

\$ _____

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments**13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known) _____

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

 No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

 No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

 No
 Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

 No
 Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

 No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$ _____	_____	\$ _____
29. Farm animals Examples: Livestock, poultry, farm-raised fish	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6	\$ _____	_____	\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known)

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$

34. Is the debtor a member of an agricultural cooperative? No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ _____ Valuation method _____ Current value \$ _____**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	\$ _____	\$ _____	\$ _____
40. Office fixtures	\$ _____	\$ _____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software	\$ _____	\$ _____	\$ _____
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles	\$ _____	\$ _____	\$ _____
42.1 _____	\$ _____	\$ _____	\$ _____
42.2 _____	\$ _____	\$ _____	\$ _____
42.3 _____	\$ _____	\$ _____	\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$

44. Is a depreciation schedule available for any of the property listed in Part 7? No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

Debtor

NORTH SOUTH US INC

Name

Case number (*if known*)**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

 No. Go to Part 9. Yes. Fill in the information below.**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of
debtor's interest
(Where available)****Valuation method used
for current value****Current value of
debtor's interest**

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1	\$ _____	_____	\$ _____
47.2	\$ _____	_____	\$ _____
47.3	\$ _____	_____	\$ _____
47.4	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1	\$ _____	_____	\$ _____
48.2	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1	\$ _____	_____	\$ _____
49.2	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

_____	\$ _____	_____	\$ _____
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51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ _____

52. Is a depreciation schedule available for any of the property listed in Part 8?

No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

No
 Yes

Debtor

NORTH SOUTH US INC

Case number (if known)

Name

Part 9: Real property

54. Does the debtor own or lease any real property?

 No. Go to Part 10. Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0

57. Is a depreciation schedule available for any of the property listed in Part 9?

 No
 Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

 No
 Yes**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

 No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known)

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.
 Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

	Total face amount	= →	\$ _____
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72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

	Tax year	\$ _____
	Tax year	\$ _____
	Tax year	\$ _____

73. Interests in insurance policies or annuities

	\$ _____
--	----------

74. Causes of action against third parties (whether or not a lawsuit has been filed)

	\$ _____
--	----------

Nature of claim _____
 Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

	\$ _____
--	----------

Nature of claim _____
 Amount requested \$ _____

76. Trusts, equitable or future interests in property

	\$ _____
--	----------

77. Other property of any kind not already listed Examples: Season tickets, country club membership

	\$ _____
	\$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

--

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Debtor

NORTH SOUTH US INC

Case number (*if known*) _____

Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 5000	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ _____	
82. Accounts receivable. Copy line 12, Part 3.	\$ _____	
83. Investments. Copy line 17, Part 4.	\$ _____	
84. Inventory. Copy line 23, Part 5.	\$ _____	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ _____	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ _____	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ _____	
88. Real property. Copy line 56, Part 9. →		\$ 0
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ _____	
90. All other assets. Copy line 78, Part 11.	+ \$ _____	
91. Total. Add lines 80 through 90 for each column..... 91a.	\$ _____	+ 91b. \$ 0
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ 5,000

Fill in this information to identify the case:

Debtor name	NORTH SOUTH US INC		
United States Bankruptcy Court for the:	EASTERN	District of	NEW YORK (State)
Case number (If known):			

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name	Describe debtor's property that is subject to a lien	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Creditor's mailing address		\$ _____	\$ _____
Creditor's email address, if known	Describe the lien		
Date debt was incurred _____	Is the creditor an insider or related party?		
Last 4 digits of account number _____	<input type="checkbox"/> No		
Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
2.2 Creditor's name	Describe debtor's property that is subject to a lien	\$ _____	\$ _____
Creditor's mailing address			
Creditor's email address, if known	Describe the lien		
Date debt was incurred _____	Is the creditor an insider or related party?		
Last 4 digits of account number _____	<input type="checkbox"/> No		
Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Yes		
<input type="checkbox"/> No	Is anyone else liable on this claim?		
<input type="checkbox"/> Yes. Have you already specified the relative priority?	<input type="checkbox"/> No		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
	As of the petition filing date, the claim is: Check all that apply.		
	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		
3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.		\$ _____	

Debtor

NORTH SOUTH US INC

Name _____

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

2. Creditor's name**Describe debtor's property that is subject to a lien**

\$ _____

\$ _____

Creditor's mailing address

Creditor's email address, if known**Describe the lien****Date debt was incurred** _____**Is the creditor an insider or related party?****Last 4 digits of account number** _____ No Yes**Do multiple creditors have an interest in the same property?****Is anyone else liable on this claim?** No No Yes. Have you already specified the relative priority? Yes. Fill out Schedule H: Codebtors (Official Form 206H). No. Specify each creditor, including this creditor, and its relative priority. Contingent

 Unliquidated Disputed Yes. The relative priority of creditors is specified on lines _____**2. Creditor's name****Describe debtor's property that is subject to a lien**

\$ _____

\$ _____

Creditor's mailing address

Creditor's email address, if known**Describe the lien****Date debt was incurred** _____**Is the creditor an insider or related party?****Last 4 digits of account number** _____ No Yes**Do multiple creditors have an interest in the same property?****Is anyone else liable on this claim?** No No Yes. Have you already specified the relative priority? Yes. Fill out Schedule H: Codebtors (Official Form 206H). No. Specify each creditor, including this creditor, and its relative priority. Contingent

 Unliquidated Disputed Yes. The relative priority of creditors is specified on lines _____

Debtor _____
Name _____

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address**On which line in Part 1
did you enter the
related creditor?****Last 4 digits of
account number
for this entity**

Line 2. _____

Fill in this information to identify the case:

Debtor	NORTH SOUTH US INC	
United States Bankruptcy Court for the:	EASTERN	District of NEW YORK (State)
Case number (if known)		

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1E List All Creditors with PRIORITY Unsecured Claims

- Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.
- List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address CAMLET FASHIONS LTD 24/ ka SHOHID MINAR ROAD 5TH FL KALAYANPUR DHAKA BANGLADESH	As of the petition filing date, the claim is: \$ <u>404,840.80</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred 12/26/2020	Basis for the claim: <u>NON PAYMENT</u>	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()		
2.2 Priority creditor's name and mailing address WIN WEAR LIMITED GAZIPUR 1704 BANGLADESH	As of the petition filing date, the claim is: \$ <u>440,455</u> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred 07/03/2020 12/26/2020	Basis for the claim: <u>NON PAYMENT</u>	
Last 4 digits of account number	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()		
2.3 Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: \$ _____ Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred	Basis for the claim: _____	
Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()		

Debtor

NORTH SOUTH US INC

Name _____

Case number (if known) _____

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

2. Priority creditor's name and mailing address

As of the petition filing date, the claim is:
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred _____

Basis for the claim: _____

Last 4 digits of account
number _____

Is the claim subject to offset?

- No
- Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (_____)**2. Priority creditor's name and mailing address**

As of the petition filing date, the claim is:
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred _____

Basis for the claim: _____

Last 4 digits of account
number _____

Is the claim subject to offset?

- No
- Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (_____)**2. Priority creditor's name and mailing address**

As of the petition filing date, the claim is:
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred _____

Basis for the claim: _____

Last 4 digits of account
number _____

Is the claim subject to offset?

- No
- Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (_____)**2. Priority creditor's name and mailing address**

As of the petition filing date, the claim is:
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred _____

Basis for the claim: _____

Last 4 digits of account
number _____

Is the claim subject to offset?

- No
- Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (_____)

Total claim _____ Priority amount _____

Debtor _____

Name _____

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address ARIES GLOBAL LOGISTICS LLC 365 FRANKLIN AVENUE FRANKLIN SQUARE, NY 11010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NON PAYMENT</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address INTERENATIONAL BOND & MARINE BROKERAGE LTD 2 HUDSON PL HOBOKEN NEW JERSEY	\$ <u>18,200</u> As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>NON PAYMENT</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.3 Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.4 Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.5 Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.6 Nonpriority creditor's name and mailing address _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

NORTH SOUTH US INC

Debtor

Name _____

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim _____

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed
- Liquidated and neither contingent nor disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred _____

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number _____

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name _____

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

4.1.

Line _____

 Not listed. Explain _____

4.2.

Line _____

 Not listed. Explain _____

4.3.

Line _____

 Not listed. Explain _____

4.4.

Line _____

 Not listed. Explain _____

4.1.

Line _____

 Not listed. Explain _____

4.5.

Line _____

 Not listed. Explain _____

4.6.

Line _____

 Not listed. Explain _____

4.7.

Line _____

 Not listed. Explain _____

4.8.

Line _____

 Not listed. Explain _____

4.9.

Line _____

 Not listed. Explain _____

4.10.

Line _____

 Not listed. Explain _____

4.11.

Line _____

 Not listed. Explain _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known) _____

Part 3: Additional Page for Others to Be Notified About Unsecured Claims**Name and mailing address****On which line in Part 1 or Part 2 is the related creditor (if any) listed?****Last 4 digits of account number, if any**

4. _____

Line _____

 Not listed. Explain _____

Debtor

NORTH SOUTH INC

Name

Case number (*if known*) _____**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a. \$ 845,295.8

5b. Total claims from Part 2

5b. + \$ 138,000

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 983,295.8

Fill in this information to identify the case:			
Debtor name	NORTH SOUTH US INC		
United States Bankruptcy Court for the:	EASTERN	District of	NEW YORK (State)
Case number (if known):	Chapter _____		

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Debtor

NORTH SOUTH US INC

Name

Case number (if known)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2. __	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case and this filing:		
Debtor Name <u>NORTH SOUTH US INC</u>		
United States Bankruptcy Court for the: <u>EASTERN</u>	District of <u>NEW YORK</u>	(State)
Case number (<i>If known</i>): _____		

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/10/2023
MM / DD / YYYY



Signature of individual signing on behalf of debtor

ISLAM MOHAMMED NUR
Printed name

PRESIDENT
Position or relationship to debtor

Fill in this information to identify the case:		
Debtor name	NORTH SOUTH US INC	
United States Bankruptcy Court for the:	EASTERN	District of NEW YORK (State)
Case number (if known):		

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:	From <u>01/31/2022</u> to MM / DD / YYYY	Filing date	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
For prior year:	From _____ to MM / DD / YYYY	MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>26,000</u>
For the year before that:	From _____ to MM / DD / YYYY	MM / DD / YYYY	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____
			<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

From the beginning of the fiscal year to filing date:	From _____ to MM / DD / YYYY	Filing date	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
For prior year:	From _____ to MM / DD / YYYY	MM / DD / YYYY	_____	\$ _____
For the year before that:	From _____ to MM / DD / YYYY	MM / DD / YYYY	_____	\$ _____
			_____	\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (*if known*) _____**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

 None

Creditor's name and address			Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1.				\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Creditor's name _____ Street _____ _____				\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
City	State	ZIP Code			
3.2.				\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Creditor's name _____ Street _____ _____				\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
City	State	ZIP Code			

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None

Insider's name and address			Dates	Total amount or value	Reasons for payment or transfer
4.1.				\$ _____	_____
Insider's name _____ Street _____ _____				\$ _____	_____
City	State	ZIP Code			
Relationship to debtor _____ _____					
4.2.				\$ _____	_____
Insider's name _____ Street _____ _____				\$ _____	_____
City	State	ZIP Code			
Relationship to debtor _____ _____					

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name Street City State ZIP Code			\$ _____
5.2. Creditor's name Street City State ZIP Code			\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name Street City State ZIP Code			\$ _____
	Last 4 digits of account number: XXXX- _____		

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. CAMLET FASHIONS LTD V NORTH SOUTH US INC ET AL	CONTRACT	UNITED STATES DISTRICT COURT Name 4TH & COOPER STREET Street	Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number 2:22-CV-06026-CCC-ESK		City CHAMBERS NJ ZIP Code 08101	
Case title 7.2. WINWEAR LIMITED	CONTRACT	Court or agency's name and address UNITED STATE DISTRICT COURT Name 225 CADMAN PLAZA E Street	Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 22-CV-5418		City BROOKLYN State NY ZIP Code 11201	

Debtor

NORTH SOUTH US INC

Name

Case number (*if known*) _____**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None

Custodian's name and address	Description of the property	Value
Custodian's name		\$ _____
Street		Court name and address
		Name _____
City _____ State _____ ZIP Code _____	Case number _____	Street _____
	Date of order or assignment _____	City _____ State _____ ZIP Code _____

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

 None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$ _____
Street			
City _____ State _____ ZIP Code _____	Recipient's relationship to debtor		
9.2. Recipient's name			\$ _____
Street			
City _____ State _____ ZIP Code _____	Recipient's relationship to debtor		

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

 None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.			
List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).			\$ _____

Debtor

NORTH SOUTH US INC

Name

Case number (if known) _____

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None**Who was paid or who received the transfer?****If not money, describe any property transferred****Dates****Total amount or value**

OKWARA LAW PC

11.1.

10/6/2023

\$ 2000

Address 90-24 SUTPHIN BLVD

Street SUTPHIN BLVD

City JAMAICA State NY ZIP Code 11435

Email or website address
_____**Who made the payment, if not debtor?**
_____**Who was paid or who received the transfer?****If not money, describe any property transferred****Dates****Total amount or value**

11.2.

\$ _____

Address
_____Street

City State ZIP Code

Email or website address
_____**Who made the payment, if not debtor?**
_____**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

 None**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value**

\$ _____

Trustee

Debtor NORTH SOUTH US INC **Case number (if known)** _____

Name _____

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
Address Street _____ _____ City _____ State _____ ZIP Code _____			
Relationship to debtor _____			
Who received transfer? _____			
13.2. _____	_____	_____	\$ _____
Address Street _____ _____ City _____ State _____ ZIP Code _____			
Relationship to debtor _____			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. Street _____ _____	From _____ To _____
City _____ State _____ ZIP Code _____	
14.2. Street _____ _____	From _____ To _____
City _____ State _____ ZIP Code _____	

Debtor

NORTH SOUTH US INC

Case number (*if known*) _____

Name _____

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care _____

15.1.

Facility name

Street

City State ZIP Code

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care _____

15.2.

Facility name

Street

City State ZIP Code

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- No
- Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan _____

Employer identification number of the plan _____

EIN: _____

Has the plan been terminated?

- No
- Yes

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

	Financial institution name and address Name Street City State ZIP Code	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	TD BANK	XXXX- 5 2 1 1	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	06/15/2023	\$ -34,00
18.2.		XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____		\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address Name Street City State ZIP Code	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
			<input type="checkbox"/> No <input type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address Name Street City State ZIP Code	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
A SELF STORE 50 BERGEN TURNPIKE, Street	ISLAM MOHAMMED NUR 8475 168TH PL #3 JAMAICA, NY 11432	CONSUMER GOODS	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name _____

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

 None

Owner's name and address

Location of the property

Description of the property

Value

\$ _____

Name _____

Street _____

City _____

State _____

ZIP Code _____

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Provide details below.

Case title _____

Court or agency name and address _____

Nature of the case _____

Status of case

- Pending
- On appeal
- Concluded

Case number _____

Name _____

Street _____

City _____

State _____

ZIP Code _____

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law? No Yes. Provide details below.

Site name and address _____

Governmental unit name and address _____

Environmental law, if known _____

Date of notice _____

Name _____

Name _____

Street _____

Street _____

City _____

State _____

ZIP Code _____

City _____

State _____

ZIP Code _____

Debtor

NORTH SOUTH US INC

Case number (if known)

Name

24. Has the debtor notified any governmental unit of any release of hazardous material?

No
 Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Name

Name

Street

Street

City State ZIP Code

City State ZIP Code

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name and address

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

25.1.

Name

Street

City State ZIP Code

25.2.

Business name and address

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

Name

Street

City State ZIP Code

25.3.

Business name and address

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

Name

Street

City State ZIP Code

NORTH SOUTH US INC

Debtor

Name _____

Case number (if known) _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None**Name and address****Dates of service**

26a.1.

Name _____

From _____ To _____

Street

City _____

State _____

ZIP Code _____

Name and address**Dates of service**

26a.2.

Name _____

From _____ To _____

Street

City _____

State _____

ZIP Code _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None**Name and address****Dates of service**

26b.1.

Name _____

From 2020 To 2023

MASUD RAHMAN

Street _____

81-15 QUEENS BLVD

ELMHURST

NY

11373

City _____

State _____

ZIP Code _____

Name and address**Dates of service**

26b.2.

Name _____

From _____ To _____

Street

City _____

State _____

ZIP Code _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Name _____

_____Street

City _____

State _____

ZIP Code _____

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name

Name and address**If any books of account and records are unavailable, explain why**

26c.2.

Name

Street

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None
Name and address

26d.1.

Name

Street

City

State

ZIP Code

Name and address

26d.2.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No

 Yes. Give the details about the two most recent inventories.
Name of the person who supervised the taking of the inventory**Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

Debtor

NORTH SOUTH US INC

Name

Case number (if known)

Name of the person who supervised the taking of the inventory

Date of
inventoryThe dollar amount and basis (cost, market, or
other basis) of each inventory

\$

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
ISLAM MOHAMMED NUR	8515 169TH ST, JAMAICA NY 11432	PRESIDENT	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

 No Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____
			From _____ To _____
			From _____ To _____
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

 No Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Name			
Street			
City	State	ZIP Code	
Relationship to debtor			

Debtor

NORTH SOUTH US INC

Case number (if known) _____

Name and address of recipient

30.2

Name _____

Street _____

City _____

State _____

ZIP Code _____

Relationship to debtor
_____**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?** No Yes. Identify below.

Name of the parent corporation _____

Employer identification number of the parent corporation
EIN: _____

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund? No Yes. Identify below.

Name of the pension fund _____

Employer identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.**

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/10/2023
MM / DD / YYYY



Signature of individual signing on behalf of the debtor

Printed name ISLAM MOHAMMED NURPosition or relationship to debtor PRESIDENT

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

 No
 Yes